



14230 U.S. PTO

# UTILITY PATENT APPLICATION TRANSMITTAL

(for new applications under 37 C.F.R. § 1.53(b))

22154 U.S. PTO  
10/767091



Attorney Docket No.: J2066(C)  
Applicant: Mridula KINI; Lalitagauri RAJWADE; Pushker SONA; Ramesh SURIANARAYANAN  
For: IMPROVED COSMETIC COMPOSITION  
Express Mail Label No.: ER 762 712 084 US  
Date Deposited: January 29, 2004  
UNUS No.: 03-0211-UNI  
Assignee: Unilever Home & Personal Care USA, Division of Conopco, Inc.

To: Assistant Commissioner for Patents  
Box: Patent Application  
Washington, D.C. 20231

## APPLICATION ELEMENTS

1. ☒ Fee Calculation (Box 13) and Authorization (Triplicate copies of this form are enclosed)
2. ☒ Specification and Claims (21) Total Pages
3. ☐ Formal Drawings ( ) Total Sheets
4. ☒ Unexecuted Declaration
5. ☐ Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Copy
  - b. ☐ Paper copy (identical to computer copy)
  - c. ☐ Statement verifying identify of above copies.

## ACCOMPANYING APPLICATION PARTS

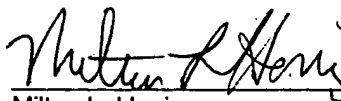
6. ☐ Information Disclosure Statement (IDS)/PTO-1449
7. ☐ Copies of IDS citations
8. ☐ Preliminary Amendment
9. ☒ Two (2) Return Receipt Postcards
10. ☐ Certified Copy of Priority Document
11. ☒ The benefit under 35 U.S.C. § 119 is claimed of the filing of India Application No. 128/MUM/03 filed January 31, 2003.
12. ☐ Other:
13. ☒ The FILING FEE (including any claims introduced or cancelled by Preliminary Amendment) is calculated below:

CLAIMS				
FOR	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$770.00
Total Claims	13 - 20		X \$ 18.00	
Independent Claims	1 - 3		X \$ 86.00	
Multiple Claims	<u>Yes</u> <u>No</u>		X \$ 290.00	
TOTAL FILING FEE ...				\$770.00

14. ☒ Charge \$770.00 to Deposit Acct. #12-1155. Triplicate copies of this letter are enclosed.
15. ☒ The Commissioner is hereby authorized to charge any additional fees, which may be required, including all required fees under
- ☒ 37 C.F.R. § 1.16;
  - ☒ 37 C.F.R. § 1.17;
  - ☒ 37 C.F.R. § 1.18.
16. ☒ **Correspondence Address:**

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Respectfully submitted,



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